

H-15-04

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APR 13 2004

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7590 01/28/2004

Pillsbury Winthrop LLP
Intellectual Property Group
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Patricia Munoz	(Depositor's name)
<i>Patricia Munoz</i>	(Signature)
4/13/04	Exp. Mail Lab, EL989437063 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/905,644	07/13/2001	Daniel Vanna Siev	018813/027 2492	2686

TITLE OF INVENTION: NOVEL NON-CONVALENT THROMBIN INHIBITORS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$10XX	\$1330X	04/28/2004
EXAMINER	ART UNIT	CLASS-SUBCLASS		\$1300	

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	Suzanne L. Biggs 1. Pillsbury Winthrop LLP 2. _____ 3. _____
XX Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.	□ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.	

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

CORVAS INTERNATIONAL, INC.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

SAN DIEGO, CALIFORNIA

Please check the appropriate assignee category or categories (will not be printed on the patent); individual corporation or other private group entity government

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 Issue Fee A check in the amount of the fee(s) is enclosed. Publication Fee Payment by credit card. Form PTO-2038 is attached. Advance Order - # of Copies 5 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-2212 (enclose an extra copy of this form).

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(Authorized Signature) (Date)

Suzanne L. Biggs 4/13/04

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This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

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TRANSMIT THIS FORM WITH FEE(S)



018813-0272492

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Siev, et al.

Certificate of Express Mailing
Under 37 C.F.R. § 1.10

Serial No. 09/905,644

I hereby certify that this paper and the attached papers are being deposited with the United States Postal Service by Express Mail, Express Mailing Label No. EL 989 437 063 US in an envelope addressed to:

Filed: July 13, 2001

Mail Stop Issue Fee
Commissioner for Patents
P.O. Box 1450
Arlington, VA 22313-1450, on this date

Allowance: January 28, 2004

Confirmation 2686
No.

For: NOVEL NON-COVALENT
THROMBIN INHIBITORS

Art Unit: 1624

Examiner: Balasubramanian, V.

4/13/04


Patricia Muñoz

TRANSMITTAL LETTER

Mail Stop Issue Fee
Commissioner for Patents
Alexandria, VA 22313-1450

Sir:

Transmitted herewith for filing are the following:

1. Change of Address Notice;
2. Part B – Issue Fee Transmittal with authorization to charge Deposit Account in the amount of \$1,345.00 for the Issue and Advance Order fees; and
3. Return Postcard.

The Commissioner is hereby authorized to charge any fee, including any submitted herewith, if the attached check(s) is in the wrong amount or otherwise improper or missing, that may be due in connection with this and the attached papers, or with this application during its

entire pendency to or to credit any overpayment to Customer No. 25700, Deposit Account 50-2212, Order No. 018813-0272492. A duplicate sheet of this transmittal is enclosed.

Respectfully submitted,

PILLSBURY WINTHROP LLP

By



Suzanne L. Biggs

Registration No. 30,158

Dated: April 13, 2004

Attorney Docket No. 018813-0272492

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